PATENT APPLICATION FEE DETERMINATION RECORD 1061795													
. Effectiv January 1, 2003									10-	<u>27</u>	9-200	5-177	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	MALL EN	ππγ ⊐	ÖR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	·
TOTAL CHARGEABLE CLAIMS			20 - minus 20=		· 60		I	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 - minus 3 =		9			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	750	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN	ڵ ؙ
12 9 05 (Column 1) (Column 2) (Column 3)								SMALL		OR	SMALL		1
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY	PRESENT EXTRA		RATE.	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE	
MOP	Total	.20	Minus	* á	2.6	=		X\$ 9=		OR	X\$18=		
AME	Independent	· 2	Minus	***	3	=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM			+140=		OR	+280=		
		•	·				1	TOTAL		OR	TOTAL ADDIT, FEE		1
	1/21/04 (Column 1) (Column 2) (Column 3)							ADDIT. FEE		,	ADDIT. FEE].
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 20	 Minus	-220		5		X\$ 9=		OR	X\$18=	1	
	Independent .	• 8-	Minus	***,2		8	j	· X42=		OR	X84=	/	1.
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							440		1	+280= /	/	1
								+140= TOTAL	 	OR	TOTAL		4
	•							ADDIT: FEE		OR	ADDIT. FEE		4
		(Column 1)			<u>າກາ 2)</u>	(Column 3)							4
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
O X	Total	•	Minus	**		o .		X\$ 9=		OR	X\$18=		
REF	independent	•	Minus	***		e .		X42≟	1	OR	X84=		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	 	1	.000	1	
	If the natural in order	mn t le lace than	the entry is see.	ma 2 we	ite 70° is ~	ohima 3.		+140=		OR	+280=		-{
.* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												4	
"	"II the "Highest Nu The "Highest Nur	imber Previously P nber Previously P	aid For (Total o	r indepen	dent) is th	e highest numbe	r fo	und in the a	ppropriate be	ox in c	olumn 1.		1
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Application or Docket Number